



2171 #6
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/815,496
		Filing Date	03/22/2001
		First Named Inventor	Robert Bradshaw et al.
		Group Art Unit	2171
		Examiner Name	Lazena Mar
Total Number of Pages in This Submission		Attorney Docket Number	INTR-00403 MAY 17 2002

ENCLOSURES (check all that apply) Technology Center 2100

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	David R. Stevens
Signature	
Date	05/07/2002

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FEE TRANSMITTAL for FY 2002

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TOTAL AMOUNT OF PAYMENT	(\$)	Group Art Unit	2171
		Attorney Docket No.	INTR-00403

METHOD OF PAYMENT					FEE CALCULATION (continued)																																																																																																																																																																																									
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number <input type="text" value="50-1610"/></p> <p>Deposit Account Name <input type="text" value="Stevens & Westberg, LLP"/></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>					<p>3. ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Fee (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td><input type="text"/></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td><input type="text"/></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td><input type="text"/></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td><input type="text"/></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td><input type="text"/></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td><input type="text"/></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td><input type="text"/></td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td><td><input type="text"/></td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td><td><input type="text"/></td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td><td><input type="text"/></td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td><td><input type="text"/></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td><input type="text"/></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td><input type="text"/></td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td><input type="text"/></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td><input type="text"/></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - 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<p>2. <input type="checkbox"/> Payment Enclosed:</p> <p><input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>					<p>FEE CALCULATION</p> <p>1. BASIC FILING FEE</p> <table border="1"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td><input type="text"/></td></tr> <tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td><input type="text"/></td></tr> <tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td><input type="text"/></td></tr> <tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td><input type="text"/></td></tr> <tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td><input type="text"/></td></tr> </tbody> </table> <p>SUBTOTAL (1) (\$) <input type="text"/></p> <p>2. EXTRA CLAIM FEES</p> <table border="1"> <thead> <tr> <th>Total Claims</th> <th>Independent Claims</th> <th>Multiple Dependent</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td></td><td></td><td></td><td>-20** = <input type="text"/></td><td>X <input type="text"/></td><td><input type="text"/></td></tr> <tr><td></td><td></td><td></td><td>- 3** = <input type="text"/></td><td>X <input type="text"/></td><td><input type="text"/></td></tr> <tr><td></td><td></td><td></td><td></td><td><input type="text"/></td><td><input type="text"/></td></tr> </tbody> </table> <table border="1"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td><input type="text"/></td></tr> <tr><td>102</td><td>84</td><td>202</td><td>42</td><td>Independent claims in excess of 3</td><td><input type="text"/></td></tr> <tr><td>104</td><td>280</td><td>204</td><td>140</td><td>Multiple dependent claim, if not paid</td><td><input type="text"/></td></tr> <tr><td>109</td><td>84</td><td>209</td><td>42</td><td>** Reissue independent claims over original patent</td><td><input type="text"/></td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td><input type="text"/></td></tr> </tbody> </table> <p>SUBTOTAL (2) (\$) <input type="text"/> 0.00</p>					Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid	101	740	201	370	Utility filing fee	<input type="text"/>	106	330	206	165	Design filing fee	<input type="text"/>	107	510	207	255	Plant filing fee	<input type="text"/>	108	740	208	370	Reissue filing fee	<input type="text"/>	114	160	214	80	Provisional filing fee	<input type="text"/>	Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				-20** = <input type="text"/>	X <input type="text"/>	<input type="text"/>				- 3** = <input type="text"/>	X <input type="text"/>	<input type="text"/>					<input type="text"/>	<input type="text"/>	Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	103	18	203	9	Claims in excess of 20	<input type="text"/>	102	84	202	42	Independent claims in excess of 3	<input type="text"/>	104	280	204	140	Multiple dependent claim, if not paid	<input type="text"/>	109	84	209	42	** Reissue independent claims over original patent	<input type="text"/>	110	18	210	9	** Reissue claims in excess of 20 and over original patent	<input type="text"/>	RECEIVED MAY 17 2002 Technology Center 21																																																																																			
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***or number previously paid, if greater. For Reissues, see above*

*Reduced by Basic Filing Fee Paid **SUBTOTAL (3) (\$)** **0.00**

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	David R. Stevens	Registration No. (Attorney/Agent)	38,626	Telephone
Signature			Date	05/07/2002

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